

PART B - FEE(S) TRANSMITTAL

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7590

07/22/2010

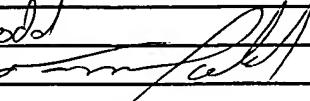
ATTN: Travis Dodd
LAW OFFICES OF TRAVIS L. DODD, PC
2490 Heyneman Hollow
Fallbrook, CA 92028



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Travis Dodd	(Depositor's name)
	
(Signature)	
8/19/10	
(Date)	

08/24/2010 EEKUBAY2 00000078 10644395

01 FC-2501	755.00	DP	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/644,395

08/19/2003

Frederik Marcel Van Der Vliet

I.T2700

6129

TITLE OF INVENTION: MULTIPLEXER HAVING IMPROVED EFFICIENCY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$0	\$0	\$755	10/22/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
WOOD, KEVIN S	2874	385-043000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
□ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	1. <u>Gavrilovich, Dodd</u>
□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. <u>Lindsey, LLP</u>
	3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)



Monterey Park, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 

Date 8/19/10

Typed or printed name Travis Dodd

Registration No. 42,491

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